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FACSIMILE TRANSMITTAL

DATE: June 10, 2004

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FACTOR & LAKE
INTELLECTUAL PROPERTY LAW LTD

**IN THE
UNITED STATES
PATENT AND TRADEMARK OFFICE**

IN RE APPLICATION OF: Torsten Heinemann

CASE: OST-011218

SERIAL NO.: 09/939,295

FILED ON: August 24, 2001

FOR: COVERING ARRANGEMENT
FOR A BUILDING, AND
COVERING PART FOR USE IN
SUCH A COVERING
ARRANGEMENT

**REQUEST
FOR
REFUND**

COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

ATTENTION OF:

EXAMINER:

Dear Sir:

If any charges or fees must be paid in connection with the following communication, they may be paid out

Applicant hereby requests a refund in the amount of \$210.00 for the above-identified application.

Adjustment date: 06/28/2004 EEKUBAY1
06/04/2004 SMORELAN 00000005 500545 09939295
01 FC:2252 210.00 CR

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34157
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54260

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In a routine check of Applicants Attorney's deposit account, Applicants Attorney noticed an unanticipated charge of \$210.00 for a two-month extension of time fee in connection with the application assigned serial number 09/939,295. Inasmuch as an extension was filed with the USPTO on March 2, 2004, along with payment by check number 6039 in the amount of \$210.00, an additional charge to the deposit account should not be incurred. We confirm that our check number 6039 has cleared our bank account.

In light of the foregoing, Applicant hereby respectfully requests a refund of the \$210.00 fee associated with serial number 09/939,295 in the form of a credit to Applicants Attorney's deposit account number 50-0545.

Should anything further be required, a telephone call to the undersigned at (312) 226-1818 is respectfully invited.

Respectfully submitted,



Jody L. Factor
One of Attorneys for Applicant

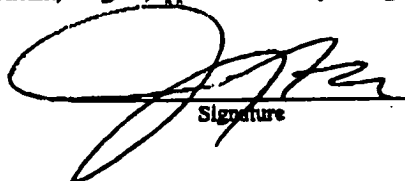
Dated: June 10, 2004

CERTIFICATE OF FACSIMILE TRANSMITTAL

I hereby certify that this correspondence is being transmitted via facsimile to the United States Patent and Trademark Office - Refund Branch at 703-308-5077 on June 10, 2004.

Jody L. Factor

Name of Applicant, assignee, applicant's attorney or Registered Representative


Signature

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